



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JUL -1 AM 8:29

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TIRE DOCTOR, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

3125 NORTH 4900 EAST, MURTAUGH, IDAHO 83344

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

KEVIN HEINER

3125 N. 4900 E., MURTAUGH, ID 83344

(Name)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

<u>Name</u>	<u>Address</u>
KEVIN HEINER	3125 N. 4900 E., MURTAUGH, ID 83344
DARRELL FUNK	3173 N. 4900 E., MURTAUGH, ID 83344
DAVID FUNK	3040 N. 3800 E., HANSEN, ID 83334
BRENT FUNK	2786 B ROCK CREEK ROAD, HANSEN, ID 83334

5. Mailing address for future correspondence (annual report notices):

3125 N. 4900 E., MURTAUGH, ID 83344

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members)

Signature Brent Funk
Typed Name: BRENT FUNK

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
07/01/2010 05:00
CK: 13626 CT: 93701 BH: 1228991
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